April 2, 2009 South Carolina Department of Health & Environmental Control

Division of Health Licensing

County: Beaufort

Facility Type: Adult Day Care

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

FRANCOIS COMMUNITY HOUSE INC

ADC-0116 / 07/31/2009
Beaufort / Non-Profit Corporation

27

99 POSSUM HILL RD

BEAUFORT, SC 29906 LASSAI, SANDRA E PH#: 843-846-1579

Fac. Cont. Email:SLASSAI 1@CHARTER.NET

PO BOX 4401 BEAUFORT, SC 29903

BEAUFORT, SC 299

FRANCOIS COMMUNITY HOUSE INC

Number of Participants

27

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed:

Number Licensed Units

County: Beaufort

190 PEMBROKE DR

Facility Type: Ambulatory Surgery

OUTPATIENT SURGERY CENTER OF HILTON HEAD LLC

Facility Name Location Street Location City, State Administrator/Phone		License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
BLUFFTON-OKATIE OUTPATIENT CENTER		ASF-0075 / 08/31/2009	3
40 OKATIE CENTER BLVD, STE 125		Beaufort / Corporation	
OKATIE, SC 29909		40 OKATIE CENTER BLVD, STE 125	
MAHONEY, TERRI-MARIE PH#: 843-689-8	206	OKATIE, SC 29909	
Fac. Cont. Email:TERRI.MAHONEY@TENETH	EALTH.COM	SOUTH CAROLINA HEALTH SERVICES INC	
Operating Rooms	2 Procedure R	Rooms 0 Endoscopy Rooms 1	
LASER AND SKIN SURGERY CENTER		ASF-0059 / 09/30/2009	2
15 HOSPITAL CENTER BLVD, STE 2		Beaufort / Ltd. Liability	
HILTON HEAD ISLAND, SC 29926		15 HOSPITAL CENTER BLVD STE 2	
BUNDY, ALBERT T PH#: 843-689-9200		HILTON HEAD ISLAND, SC 29926	
Fac. Cont. Email: HHDERMLYNN@MAC.COM		DERMATOLOGY SURGERY CENTER L L C	
Operating Rooms	2 Procedure R	Rooms 0 Endoscopy Rooms 0	

HILTON HEAD ISLAND, SC 29926	190 PEMBROKE DR
THOMAS, RICHARD E PH#: 843-682-5050	HILTON HEAD ISLAND, SC 29926
Fac. Cont. Email:RTHOMAS@HHISURGERY.COM	OUTPATIENT SURGERY CENTER OF HILTON HEAD LLC
Operating Rooms 2 Procedure R	ooms 0 Endoscopy Rooms 2
SURGERY CENTER OF BEAUFORT LLC	ASF-0048 / 06/30/2009 5
1033 RIBAUT RD	Beaufort / Ltd. Liability
BEAUFORT, SC 29902-5436	1033 RIBAUT RD
EVEC, CAROLYN A PH#: 843-322-5800	BEAUFORT, SC 29902
Fac. Cont. Email:CEVEC@BEAUFORTSURGERY.COM	SURGERY CENTER OF BEAUFORT LLC
Operating Rooms 3 Procedure R	ooms 0 Endoscopy Rooms 2

ASF-0092 / 01/31/2010 Beaufort / Ltd. Liability

Totals For Facility/License Type Ambu	latory Sur	gery	
Number of Activities/Facilities licensed:	4	Number Licensed Units	14

County: Beaufort

Facility Type: Body Piercing

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Administrator/Phone
Mailing/Billing Addres
Licensee
Licensee
Licensed Unit

BODY PIERCING STUDIO AT ISLAND REPUBLIC

BP-0128 / 04/30/2009
1

BODY PIERCING STUDIO AT ISLAND REPUBLIC

BP-0128 / 04/30/2009

1

1460 FORDING ISLAND RD STE 210

Beaufort / Ltd. Liability

BLUFFTON, SC 29910

BITTON, AMIR M PH#: 843-836-2030

BLUFFTON, SC 29910

Fac. Cont. Email: ALLSTAR 20@HARGRAY.COM

ALL STAR SERVICE AND RETAIL OF SC LLC

Totals For Facility/License Type Body Piercing	
Number of Activities/Facilities licensed: 1 Number Licensed Units	1

Facility Type: Commun	ity Residential	Care	Facility
-----------------------	-----------------	------	----------

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee Lice	Licensed Unit	
A'LELIA RESIDENTIAL CARE	CRC-1115 / 09/30/2009	20	
10 JACOB WHITE RD	Beaufort / Corporation		
YEMASSEE, SC 29945	10 JACOB WHITE RD		
MILES, CARRIE R PH#: 843-466-0356	YEMASSEE, SC 29945		
Fac. Cont. Email:No Fac Cont. email on record	MILES RESIDENTIAL CARE FACILITY INC		
Certifications:Alzheimer Care			
BOSTICK'S ADULT RESIDENTIAL CARE FACILITY	CRC-0143 / 05/31/2009	20	
1912 DUKE ST	Beaufort / Sole Proprietorship		
BEAUFORT, SC 29902	PO BOX 1841		
BOSTICK, JOSEPHINE G PH#: 843-524-3906	BEAUFORT, SC 29901		
Fac. Cont. Email: MBJORDAN2@HARGRAY.COM	JOSEPHINE G BOSTICK		
Certifications:None			
BROAD CREEK COMMUNITY RESIDENTIAL CARE	CRC-1036 / 07/31/2009	50	
801 LEMON GRASS CT	Beaufort / Corporation		
HILTON HEAD ISLAND, SC 29928-0000	801 LEMON GRASS CT		
JOHNSON, STEPHANI PH#: 843-341-7300	HILTON HEAD ISLAND, SC 29928		
Fac. Cont. Email:No Fac Cont. email on record	CC-HILTON HEAD INC		
Certifications:Alzheimer Care			
CAROLINA HOUSE OF BLUFFTON	CRC-1381 / 04/30/2010	70	
800 FORDING ISLAND RD	Beaufort / Corporation		
BLUFFTON, SC 29910	800 FORDING ISLAND RD		
GOLDEN, THOMAS E PH#:	BLUFFTON, SC 29910		
Fac. Cont. Email:No Fac Cont. email on record	SOUTHERN ASSISTED LIVING INC		
Certifications:Alzheimer Unit, Alzheimers Care			
CAROLINA HOUSE OF HILTON HEAD	CRC-1382 / 04/30/2010	72	
35 BEACH CITY RD	Beaufort / Corporation		
HILTON HEAD ISLAND, SC 29926	35 BEACH CITY RD		
MAURY, RHONEDA V PH#: 843-342-5599	HILTON HEAD ISLAND, SC 29926		
Fac. Cont. Email:RMAURY@SOUTHERNASSISTED.COM	SOUTHERN ASSISTED LIVING INC		
Certifications:Alzheimer Unit, Alzheimers Care			
HAWTHORNE INN AT HILTON HEAD ASSISTED LIVING COMMUNITY	CRC-1397 / 06/30/2009	51	
15 MAIN ST	Beaufort / Ltd. Liability		
HILTON HEAD ISLAND, SC 29926-4606	3723 FAIRVIEW INDUSTRIAL DR SE, STE 2	70	
SAMPOGNA, LINDA E PH#:	SALEM, OR 97302		
Fac. Cont. Email:No Fac Cont. email on record	HILTON HEAD SENIOR LIVING LLC		
Certifications:None			

Facility Type: Community Residential Care Fa	Facility
--	----------

acility Name License Nbr/Expiration Date coation Street County/Ownership Typ coation City, State Mailing/Billing Addres Licensee I		Licensed Unit	
HELENA HOUSE	CRC-1409 / 11/30/2009	44	
1624 PARIS AVE	Beaufort / Corporation		
PORT ROYAL, SC 29935	1624 PARIS AVE		
WELSH, LISANNE F PH#: 843-982-0233	PORT ROYAL, SC 29935		
Fac. Cont. Email: HELENAHOUSE@ALCCO.COM	ASSISTED LIVING CONCEPTS INC		
Certifications:Alzheimer Care			
MARQUISE RESIDENTIAL HOME	CRC-0863 / 03/31/2010	5	
9 FRAZIER VILLAGE DR	Beaufort / Sole Proprietorship		
BEAUFORT, SC 29906	9 FRAZIER VILLAGE DR		
HAYWARD, MATTIE L PH#: 843-846-8417	BEAUFORT, SC 29906		
Fac. Cont. Email:No Fac Cont. email on record	MATTIE L HAYWARD		
Certifications:None			
MORNINGSIDE OF BEAUFORT	CRC-1267 / 06/30/2009	49	
109 OLD SALEM RD	Beaufort / Ltd. Liability		
BEAUFORT, SC 29902	109 OLD SALEM RD		
SIEGNER, TAMATHE J PH#: 843-982-0220	BEAUFORT, SC 29902		
Fac. Cont. Email:TSIEGNER@5SQC.COM	MORNINGSIDE OF BEAUFORT L L C		
Certifications:None			
PALM MEADOWS COURT MEMORY CARE COMMUNITY	CRC-1275 / 06/30/2009	36	
48 MAIN ST	Beaufort / Ltd. Liability		
HILTON HEAD ISLAND, SC 29926	3723 FAIRVIEW INDUSTRIAL DR SE, STE 27	0	
BEST, LORENA K PH#: 843-342-7122	SALEM, OR 97302		
Fac. Cont. Email:BRETT.SALMON@SUNWESTMANAGEMENT.COM	SANDDOLLAR COURT MEMORY CARE L L C		
Certifications:Alzheimer Care			
PALM MEADOWS VILLAGE ASSISTED LIVING COMMUNITY	CRC-1276 / 06/30/2009	52	
80 MAIN ST	Beaufort / Ltd. Liability		
HILTON HEAD ISLAND, SC 29926	3723 FAIRVIEW INDUSTRIAL DR SE, STE 27	0	
DREW, MELLISSA S PH#: 843-689-9143	SALEM, OR 97302		
Fac. Cont. Email:BRETT.SALMON@SUNWESTMANAGEMENT.COM	SANDDOLLAR VILLAGE ASSISTED LIVING L L C		
Certifications:None			
PORT ROYAL COMMUNITY RESIDENCE	CRC-1173 / 08/31/2009	15	
1508 OLD SHELL RD	Beaufort / State		
PORT ROYAL, SC 29935-1705	PO BOX 4706		
MAYSE, WANDA PH#: 843-525-7684	COLUMBIA, SC 29240-4706		
Fac. Cont. Email:WMAYSE@BCGOV.NET	SC DEPARTMENT OF DISABILITIES AND SPECIAL N	EEDS	
Certifications:None			

Facility	Type:	Community	Residential	Care	Facility
----------	-------	-----------	-------------	------	----------

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee Licensed Unit		
RIVER OAKS RESIDENTIAL CARE INC	CRC-0733 / 09/30/2009	62	
1251 LADY'S ISLAND DR	Beaufort / Corporation		
PORT ROYAL, SC 29935-1128	1251 LADY'S ISLAND DR		
AUSTIN, TIMOTHY D PH#: 843-521-2298	PORT ROYAL, SC 29935		
Fac. Cont. Email:No Fac Cont. email on record	RIVER OAKS RESIDENTIAL CARE INC		
Certifications:Alzheimer Care			
SUMMIT PLACE OF BEAUFORT	CRC-1375 / 12/31/2009	87	
1119 PICKPOCKET PLANTATION DR	Beaufort / Ltd. Liability		
BEAUFORT, SC 29902-0000	300 N GREENE ST STE 1000		
LEE-POTTER, KEARA N PH#: 843-770-0105	GREENSBORO, NC 27401		
Fac. Cont. Email: KPOTTER@SDBELL.COM	SUMMIT PLACE OF BEAUFORT PROPERTY L	LC	

Certifications:Alzheimer	Unit,	Alzheimers	Care

Totals For Facility/License Type Community Residential Care Facility				
Number of Activities/Facilities licensed: 14 Number Licensed Units 633				

County: Beaufort

Facility Type: Home Health

Facility Name License Nbr/Expiration Date
Location Street County/Ownership Typ
Location City, State Mailing/Billing Addres

Administrator/Phone Licensee Licensed Unit

AMEDISYS HOME HEALTH OF HILTON HEAD HHA-0189 / 01/31/2010

11 PALMETTO PKWY STE 101 Beaufort / Ltd. Liability HILTON HEAD ISLAND, SC 29926-3733 11 PALMETTO PKWY STE 101

MAILHOT, NOEL M PH#: 843-681-7605 HILTON HEAD ISLAND, SC 29926-3733

Fac. Cont. Email:2210@AMEDISYS.COM AMEDISYS SC LLC

Counties Served Beaufort, Jasper

License Restrictions

Physical Therapy Y Speech Therapy: Y Occupational Therapy Y Med. Social Services Y

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

CAREONE HOME HEALTH SERVICES AN AMEDISYS COMPANY INC HHA-0203 / 02/28/2010

23 PLANTATION PARK DR STE 503 Beaufort / Ltd. Liability

BLUFFTON, SC 29910 23 PLANTATION PARK DR STE 503

GRUBB, JODI S PH#: 843-815-8088 BLUFFTON, SC 29910

Fac. Cont. Email:2224@AMEDISYS.COM AMEDISYS SC LLC

Counties Served Beaufort, Hampton, Jasper

License Restrictions

Physical Therapy Y Speech Therapy: N Occupational Therapy Y Med. Social Services Y

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

CYPRESS CLUB HOME HEALTH AGENCY HHA-0146 / 07/31/2009

20 LADY SLIPPER LN Beaufort / Corporation HILTON HEAD ISLAND, SC 29926 20 LADY SLIPPER LN

HARRISON, ANN E PH#: 843-689-7017 HILTON HEAD ISLAND, SC 29926

Fac. Cont. Email:ANNHARRISONI@JUNO.COM CYPRESS CLUB INC

Counties Served Beaufort, Special Note - Restricted to Residents of The Cypress Club Only on Hilton Head Island, South Carolina

License Restrictions SERVING CAMPUS RESIDENTS ONLY

Physical Therapy N Speech Therapy: N Occupational Therapy N Med. Social Services N

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment N

Other:

HOSPICE CARE OF THE LOWCOUNTRY HOME HEALTH HHA-0117 / 09/30/2009 2

7

119 PALMETTO WAY Beaufort / Corporation

BLUFFTON, SC 29910 PO BOX 3827

BROOKS, LYNN T PH#: 843-706-2296 BLUFFTON, SC 29910-3827

Fac. Cont. Email: INFO@HOSPICECARELC.ORG HOSPICE CARE OF THE LOWCOUNTRY INC

Counties Served Beaufort, Jasper

License Restrictions

Physical Therapy Y Speech Therapy: Y Occupational Therapy Y Med. Social Services Y

Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment Y

Other:

Facility Type: Home Health

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

1

SEABROOK WELLNESS AND HOME HEALTH CARE

300 WOODHAVEN DR HILTON HEAD ISLAND, SC 29928-4684

EHLERS, PHYLLIS PH#: 843-842-3747 Fac. Cont. Email:PEHLERS@HARGRAY.COM HHA-0173 / 11/30/2009 Beaufort / Corporation

300 WOODHAVEN DR

HILTON HEAD ISLAND, SC 29928 SEABROOK OF HILTON HEAD INC THE

Counties Served Spartanburg, Special Note - SERVING CAMPUS RESIDENTS ONLY License Restrictions SERVING CAMPUS RESIDENTS ONLY

Physical Therapy Y Speech Therapy: Y Occupational Therapy Y Med. Social Services Y Home Health Aid: Y Medical Supplies/Appliances/Durable Medical Equipment Y

Other:

Totals	For	Facility/License	Type	Home	Health
--------	-----	------------------	------	------	--------

Number of Activities/Facilities licensed:

Number Licensed Units

County: Beaufort

Facility Type: Hospice Program Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
FRIENDS OF CAROLINE HOSPICE OF BEAUFORT INC	HPC-0057 / 06/30/2009	1
1110 13TH ST	Beaufort / Non-Profit Corporation	
PORT ROYAL, SC 29935	1110 13TH ST	
PORTER, BEVERLEY A PH#: 843-525-6257	PORT ROYAL, SC 29935	
Fac. Cont. Email:No Fac Cont. email on record	FRIENDS OF CAROLINE HOSPICE OF BEAUFOR	RT INC
Counties Served Beaufort		
HOSPICE CARE OF AMERICA INC - LOW COUNTRY	HPC-0097 / 07/31/2009	12
21 PROFESSIONAL VILLAGE CIR	Beaufort / Corporation	
BEAUFORT, SC 29907	21 PROFESSIONAL VILLAGE CIR	
NOLETTE, SARA PH#: 843-322-0063	BEAUFORT, SC 29907	
Fac. Cont. Email:WTHOMPSON@MSA-CORP.COM	HOSPICE CARE OF AMERICA INC	
Counties Served Aiken, Allendale, Barnwell, Be Dorchester, Edgefield, Hampton	- · · · · · · · · · · · · · · · · · · ·	on,
HOSPICE CARE OF THE LOW COUNTRY	HPC-0028 / 04/30/2009	3
119 PALMETTO WAY	Beaufort / Corporation	
BLUFFTON, SC 29910	PO BOX 3827	
BROOKS, LYNN T PH#: 843-706-2296	BLUFFTON, SC 29910	
Fac. Cont. Email: INFO@HOSPICECARELC.ORG	HOSPICE CARE OF THE LOWCOUNTRY INC	
Counties Served Beaufort, Hampton, Jasper		
TIDEWATER HOSPICE PA	HPC-0119 / 02/28/2010	4
181 BLUFFTON DR UNIT B102	Beaufort / Corporation	
BLUFFTON, SC 29201	181 BLUFFTON DR UNIT B102, MAGNOL	IA BUSINESS
SAXON, SUSAN E PH#: 843-757-9388	PARK BLUFFTON, SC 29201	
Fac. Cont. Email:SUSANSAXON@TIDEWATERHOSPICE.COM	TIDEWATER HOSPICE PA	
Counties Served Beaufort, Colleton, Hampton, J		
UNITED HOSPICE OF BEAUFORT	HPC-0087 / 06/30/2009	5
1605 NORTH ST	Beaufort / Corporation	
BEAUFORT, SC 29902	1605 NORTH ST	
OLIVER, MEGAN PH#: 404-292-2081	BEAUFORT, SC 29902	
Fac. Cont. Email:No Fac Cont. email on record	UNITED HOSPICE INC	
Counties Served Beaufort, Charleston, Colleton	, Hampton, Jasper	
Totals For Facility/License Type Hospice P Number of Activities/Facilities licensed:	rogram 5 Number Licensed Units	25

County: Beaufort

955 RIBAUT RD

Facility Type: Hospital or Institutional General Infirmary

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Mailing/Billing Addres Location City, State

Administrator/Phone Licensee

BEAUFORT MEMORIAL HOSPITAL HTL-0026 / 11/30/2009

Licensed Unit

197

Beaufort / County

BEAUFORT, SC 29902 955 RIBAUT RD

BEAUFORT, SC 29902 TOOMEY, RICHARD K PH#: 843-522-5200

BEAUFORT COUNTY MEMORIAL HOSPITAL Fac. Cont. Email:AMECHERLE@BMHSC.ORG

Licensed Beds: General: 169 Psychistric: 14 Rehab: 14 Substance Abuse

Other Beds NICU: 0 Neonatal Special Care 5

Certifications: Trauma Center Level III, Perinatal Level II, JCAHO Accredited

HILTON HEAD HOSPITAL HTL-0646 / 10/31/2009

25 HOSPITAL CENTER BLVD Beaufort / Limited Liability Limited Partnership

HILTON HEAD ISLAND, SC 29926 25 HOSPITAL CENTER BLVD

LAMKIN, ELIZABETH PH#: 843-689-8206 HILTON HEAD ISLAND, SC 29926

Fac. Cont. Email: ELIZABETH. E. LAMKIN@TENETHEALTH. COM HILTON HEAD HEALTH SYSTEM L P

Licensed Beds: General: 93 Psychistric: Rehab: 0 Substance Abuse

Other Beds NICU: 0 Neonatal Special Care

Certifications: Perinatal Level I, JCAHO Accredited

Totals For Facility/License Type Hospital or Institutional General Infirmary

Number of Activities/Facilities licensed: 2 Number Licensed Units 290

County: Beaufort

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee	Licensed Unit
BAYVIEW MANOR LLC	NCF-0898 / 05/31/2009	170
11 TODD DR	Beaufort / Ltd. Liability	
BEAUFORT, SC 29902-1103	PO BOX 1103	
SYNDER, GARY PH#:	BEAUFORT, SC 29901-1103	
Fac. Cont. Email:No Fac Cont. email on record	BAYVIEW MANOR LLC	
Licensed Beds Nursing Home 170 Institution	nal Nursing Home 0	
Certifications:None		
BROAD CREEK A CLASSIC RESIDENCE BY HYATT CARE CENTER	NCF-0753 / 07/31/2009	25
801 LEMON GRASS CT	Beaufort / Corporation	
HILTON HEAD ISLAND, SC 29928-0000	801 LEMON GRASS CT	
THAXTON, LYNN A PH#: 843-341-7300	HILTON HEAD ISLAND, SC 29928	
Fac. Cont. Email:LTHAXTON@HYATTCLASSIC.COM	CC-HILTON HEAD INC	
Licensed Beds Nursing Home 25 Institution	aal Nursing Home 0	
Certifications:Alzheimer Care		
FRASER HEALTH CARE	NCF-0414 / 09/30/2009	33
300 WOODHAVEN DR	Beaufort / Corporation	
HILTON HEAD, SC 29928-4684	300 WOODHAVEN DR	
MILLER, LINDA D PH#: 843-842-3747	HILTON HEAD ISLAND, SC 29928	
Fac. Cont. Email:LMILLER@HARGRAY.COM	SEABROOK OF HILTON HEAD INC THE	
Licensed Beds Nursing Home 19 Institution	nal Nursing Home 14	
Certifications:None		
LIFE CARE CENTER OF HILTON HEAD	NCF-0725 / 05/31/2009	88
120 LAMOTTE DR	Beaufort / Corporation	
HILTON HEAD ISLAND, SC 29925-2259	120 LAMOTTE DR	
HARDY JR, JAMES M PH#: 843-681-6006	HILTON HEAD ISLAND, SC 29926	
Fac. Cont. Email:JIM_HARDY@LCCA.COM	LIFE CARE CENTERS OF AMERICA INC	
Licensed Beds Nursing Home 88 Institution	aal Nursing Home 0	
Certifications:None		
PRESTON HEALTH CENTER	NCF-0576 / 04/30/2009	77
87 BIRDSONG WAY	Beaufort / Limited Liability Li	mited Partnership
HILTON HEAD ISLAND, SC 29926-1365	87 BIRD SONG WAY	
ELLIOTT, AMANDA J PH#: 843-689-7077	HILTON HEAD ISLAND, SC 29926	
Fac. Cont. Email: ELLIOTTAMANDA@LCSNET.COM	CYPRESS OF HILTON HEAD ISLAND ASSOC	IATES L P THE
Licensed Beds Nursing Home 69 Institution	al Nursing Home 8	
Certifications:Alzheimer Unit		

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

Totals For Facility/License Type Nursing Home		
Number of Activities/Facilities licensed: 5	Number Licensed Units	393

County: Beaufort

Facility Type: PSAD Outpatient

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

BEAUFORT COUNTY ALCOHOL & DRUG ABUSE DEPARTMENT

1905 DUKE ST, ROOM 270 - HUMAN SERVICES BUILDING

BEAUFORT, SC 29902

BOYNE JR, DOUGLAS H PH#: 843-470-4545

Fac. Cont. Email:BUDB@BCGOV.NET

OTP-0018 / 07/31/2009

Beaufort / County

PO BOX 311

BEAUFORT, SC 29901

BEAUFORT COUNTY ALCOHOL AND DRUG ABUSE DEPARTMENT

Certifications:None

Totals For Facility/License Type PSAD	Outpatient			
Number of Activities/Facilities licensed:	1 Number	r Licensed Units	2	

County: Beaufort

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

17

DCI PORT ROYAL
300 MIDTOWN DR

BURTON, SC 29906

WATTS, SUSAN PH#: 843-521-4300

Fac. Cont. Email: ELAINE.SWEATMAN@DCIINC.ORG

ERD-0132 / 05/31/2009 Beaufort / Corporation 1411 KING ST

CHARLESTON, SC 29403

DIALYSIS CLINIC INC

Licensed Stations: Hemodia:
FMC DIALYSIS SERVICES - HILTON HEAD

Licensed Stations:

Hemodialysis:

17 Peritoneal:

oneal: 0 ERD-0123 / 07/31/2009

16

22

25 HOSPITAL CENTER BLVD, MEDICAL PAVILION - STE 108 Beaufort / Corporation

HILTON HEAD ISLAND, SC 29926

WIRT, LELIA PH#: 843-681-5840

25 HOSPITAL CENTER BLVD, MEDICAL PAVILION - STE

108 HILTON HEAD ISLAND, SC 29926

BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

Licensed Stations: Hemodialysis:

Fac. Cont. Email: No Fac Cont. email on record

FMC DIALYSIS SERVICES LOW COUNTRY DIALYSIS

TWO PROFESSIONAL DR, 10 JOHNNY MORRALL CIR PORT ROYAL, SC 29935

TEDRICK, SUSAN PH#: 843-524-2373

Fac. Cont. Email:No Fac Cont. email on record

ERD-0097 / 05/31/2009

Beaufort / Corporation 10 JOHNNY MORRALL CIR

PORT ROYAL, SC 29935-1148

BIO-MEDICAL APPLICATIONS OF SOUTH CAROLINA INC

Totals For Facility/License Type Renal Dialysis

Hemodialysis:

Number of Activities/Facilities licensed:

22

16

Peritoneal:

Peritoneal:

Number Licensed Units

Facility	Type:	Tattoo	Facilit	y
----------	-------	--------	---------	---

Facility Name Location Street Location City, State Administrator/Phone	License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee Licensee	d Unit
	nicensee nicensee	
BEAUTY MARKS TATTOO'S	TF-0064 / 04/30/2009	2
220-B SAVANNAH HWY	Beaufort / Limited Liability	
BEAUFORT, SC 29906	13004 LAKE MELTON ST	
WILLS, CLARISSA M PH#: 843-470-0304	BEAUFORT, SC 29906	
Fac. Cont. Email:No Fac Cont. email on record	GOTHIC PIERCING AND BEAUTY MARKS TATTOO'S LLC	
ISLAND TATTOO COMPANY	TF-0057 / 10/31/2009	5
115 ARROW RD UNIT 1	Beaufort / Corporation	
HILTON HEAD, SC 29928	1460 FORDING ISLAND RD #210	
BITTON, AMIR M PH#: 843-785-3344	BLUFFTON, SC 29910	
Fac. Cont. Email:No Fac Cont. email on record	ISLAND TATTOO COMPANY INC	
YES IT HURTS! TATTOO	TF-0083 / 11/30/2009	2
1715 RIBAUT RD	Beaufort / Partnership	
PORT ROYAL, SC 29935	1715 RIBAUT RD	
SMITH, ANGELA M PH#: 843-524-8288	PORT ROYAL, SC 29935	
Fac. Cont. Email: YESITHURTSTATTOOS@GMAIL.COM	ANGELA SMITH WILLIAM SMITH & JO DYKE	

Totals For Facility/License Type Tattoo Facility		
Number of Activities/Facilities licensed: 3	Number Licensed Units 9	

Number of Activities/Facilities licensed in county of Beaufort # Lics 44 Number Licensed Units : 1,458

Report Total

Total Number of Activities/Facilities licensed 44 Total Number Licensed Units 1,458